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10/646, 679

PTO/SB/21 (08-03)

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**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)		Application Number	Unassigned
		Filing Date	August 22, 2003
		First Named Inventor	Bardy, Gust H.
		Art Unit	Unassigned
		Examiner Name	Unassigned
Total Number of Pages in This Submission		Attorney Docket Number	020.0347.US.CON

**ENCLOSURES (check all that apply)**

<input checked="" type="checkbox"/> Fee Transmittal Form  <input checked="" type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment / Reply  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/ Incomplete Application  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input checked="" type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation  <input type="checkbox"/> Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Group  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):  Postcard
Remarks		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual name	Law Offices of Patrick J.S. Inouye
Signature	
Date	April 16, 2004

**CERTIFICATE OF TRANSMISSION/MAILING**

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Type or printed name	Larissa V. Pigott		
Signature		Date	April 16, 2004

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# FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

 Applicant Claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$1,750)

## Complete if Known

Application Number	Unassigned
Filing Date	August 22, 2003
First Named Inventor	Bardy
Examiner Name	Unassigned
Art Unit	Unassigned
Attorney Docket No.	020.0347.US.CON

## METHOD OF PAYMENT (check all that apply)

 Check  Credit card  Money Order  Other  None
 Deposit Account

Deposit Account Number	501144
Deposit Account Name	Law Offices of Patrick J.S. Inouye

## The Commissioner is authorized to: (check all that apply)

Charge fee(s) indicated below  Credit any overpayments  
 Charge any additional fee(s) during the pendency of this application  
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

## FEE CALCULATION

## 1. BASIC FILING FEE

Large Entity | Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1001	750	2001	375	Utility filing fee	750
1002	330	2002	165	Design filing fee	
1003	520	2003	260	Plant filing fee	
1004	750	2004	375	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	

SUBTOTAL (1) (\$ 750)

## 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Independent Claims	Extra Claims		Fee from below	Fee Paid
		19	-20** = 0	X	18 = 0
	3	-3** = 0	X	84	= 0

## Multiple Dependent

Large Entity	Small Entity	Fee Description
Fee Code	Fee (\$)	Fee Description
1202	18	2202 9 Claims in excess of 20
1201	84	2201 42 Independent claims in excess of 3
1203	280	2203 140 Multiple dependent claim, if not paid
1204	84	2204 42 **Reissue independent claims over original patent
1205	18	2205 9 **Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)

\*\* or number previously paid, if greater; For Reissues, see above

## 3. ADDITIONAL FEES

Large Entity | Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for ex parte reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	
1252	410	2252	205	Extension for reply within second month	
1253	930	2253	465	Extension for reply within third month	
1254	1,450	2254	725	Extension for reply within fourth month	
1255	1,970	2255	985	Extension for reply within fifth month	
1401	320	2401	160	Notice of Appeal	
1402	320	2402	160	Filing a brief in support of an appeal	
1403	280	2403	140	Request for oral hearing	
1451	1,510	1451	1,510	Petition to Institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,300	2453	650	Petition to revive - unintentional	
1501	1,300	2501	650	Utility issue fee (or reissue)	
1502	470	2502	235	Design issue fee	
1503	630	2503	315	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	750	2809	375	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	750	2810	375	For each additional invention to be examined (37 CFR § 1.129(b))	
1801	750	2801	375	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	

Other fee (specify) \_\_\_\_\_

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

SUBMITTED BY		Complete if applicable	
Name (Print/Type)	Patrick J.S. Inouye, Esq.	Registration No. (Attorney/Agent)	40297
Signature		Telephone	(206) 381-3900

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## UTILITY PATENT APPLICATION TRANSMITTAL

(New Nonprovisional Applications Under 37 CFR § 1.53(b))

Attorney Docket No.  
020.0347.US.CON

## TO THE ASSISTANT COMMISSIONER FOR PATENTS:

Transmitted herewith is the patent application of ( ) application identifier or (X) first named inventor, Gust H. Bardy, entitled System And Method For Providing Feedback To An Individual Patient For Automated Remote Patient Care, for a(n):

( ) Original Patent Application.

(X) Continuing Application (prior application not abandoned):

(X) Continuation ( ) Divisional ( ) Continuation-in-part (CIP) of prior application No: 10/251,473 filed on: 9/20/2002, a continuation of U.S. Patent No. 6,478,737, issued on 11/12/2002, which is a continuation of U.S. Patent No. 6,331,160, issued 12/18/2001, which is a continuation of U.S. Patent No. 6,203,495, issued 3/20/2001, which is a continuation-in-part of U.S. Patent No. 6,312,378, issued 11/6/2001.

(X) A statement claiming priority under 35 USC § 120 has been added to the specification.



22895

PATENT TRADEMARK OFFICE

Enclosed are:

(X) Specification; 36 Total Pages. (X) Drawing(s); 21 Total Sheets.

(X) Oath or Declaration:

(X) A Newly Executed Combined Declaration and Power of Attorney:

(X) Signed. ( ) Unsigned. ( ) Partially Signed.

( ) A Copy from a Prior Application for Continuation/Divisional (37 CFR § 1.63(d)).

( ) Incorporation by Reference. The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied, is considered as being part of the disclosure of the accompanying application and is hereby incorporated herein by reference.

( ) Signed Statement Deleting Inventor(s) Named in the Prior Application. (37 CFR § 163(d)(2)).

(X) Formal Drawing Transmittal Letter. (X) Return Receipt Postcard.

( ) Associate Power of Attorney. (X) A Check of \$ 750.00 for the Filing Fee.

( ) Preliminary Amendment. (X) Information Disclosure Statement and Form PTO-1449.

(X) A Duplicate Copy of this Form for Processing Fee Against Deposit Account.

(X) Fee Transmittal Sheet

( ) Applicant claims small entity status.

( ) Other: \_\_\_\_\_

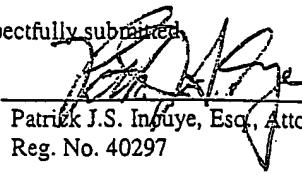
## CLAIMS AS FILED

FOR	NO. FILED	NO. EXTRA	RATE	FEES
Total Claims	19	0	\$18.00	\$ 0.00
Independent Claims	3	0	\$84.00	\$ 0.00
Multiple Dependent Claims (if applicable)				\$0.00
Assignment Recording Fee				\$0.00
Basic Filing Fee				\$750.00
			Total Filing Fee	\$ 750.00

Charge \$ \_\_\_\_\_ to Deposit Account 501144 pursuant to 37 CFR § 1.25. At any time during the pendency of this application, please charge any fees required or credit any overpayment to this Deposit Account.

Respectfully submitted,

By: \_\_\_\_\_

  
Patrick J.S. Inouye, Esq., Attorney of Record  
Reg. No. 40297

Date: August 22, 2003

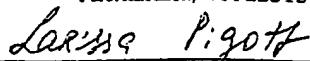
Correspondence Address:

Law Offices of Patrick J.S. Inouye  
810 Third Avenue Suite 258  
Seattle, WA 98104  
Phone: (206) 381-3900  
Fax: (206) 381-3999

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## UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket No.  
020.0347.US.CON

(New Nonprovisional Applications Under 37 CFR § 1.53(b))

## TO THE ASSISTANT COMMISSIONER FOR PATENTS:

APR 20 2004

Transmitted herewith is the patent application of ( ) application identifier or (X) first named inventor, Gust H. Bardy, entitled System And Method For Providing Feedback To An Individual Patient For Automated Remote Patient Care, for a(n): Original Patent Application. Continuing Application (prior application not abandoned):

Continuation  Divisional  Continuation-in-part (CIP) of prior application No: 10/251,473 filed on: 9/20/2002, a continuation of U.S. Patent No. 6,478,737, issued on 11/12/2002, which is a continuation of U.S. Patent No. 6,331,160, issued 12/18/2001, which is a continuation of U.S. Patent No. 6,203,495, issued 3/20/2001, which is a continuation-in-part of U.S. Patent No. 6,312,378, issued 11/6/2001.

 A statement claiming priority under 35 USC § 120 has been added to the specification.

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<input checked="" type="checkbox"/> Formal Drawing Transmittal Letter.	<input type="checkbox"/> Return Receipt Postcard.
<input type="checkbox"/> Associate Power of Attorney.	<input type="checkbox"/> A Check of \$ <u>750.00</u> for the Filing Fee.
<input type="checkbox"/> Preliminary Amendment.	<input type="checkbox"/> Information Disclosure Statement and Form PTO-1449.
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<input checked="" type="checkbox"/> Fee Transmittal Sheet	
<input type="checkbox"/> Applicant claims small entity status.	
<input type="checkbox"/> Other: _____	

## CLAIMS AS FILED

FOR	NO. FILED	NO. EXTRA	RATE	Fee
Total Claims	19	0	\$18.00	\$ 0.00
Independent Claims	3	0	\$84.00	\$ 0.00
Multiple Dependent Claims (if applicable)				\$0.00
Assignment Recording Fee				\$0.00
Basic Filing Fee				\$750.00
				Total Filing Fee
				\$ 750.00

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Respectfully submitted,

By: \_\_\_\_\_

Patrick J.S. Inouye, Esq., Attorney of Record  
Reg. No. 40297

Date: August 22, 2003

Correspondence Address:

Law Offices of Patrick J.S. Inouye  
810 Third Avenue Suite 258  
Seattle, WA 98104  
Phone: (206) 381-3900  
Fax: (206) 381-3999

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By: Larissa V. Pigott

Typed Name: Larissa V. Pigott

Express Mail Label No.: EV317784518US

Date of Deposit: August 22, 2003

U.S. Patent Application entitled: "System And Method For Providing Feedback To An Individual Patient For Automated Remote Patient Care"

Applicant: Gust H. Bardy

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- USPTO Fee Transmittal Sheet
- Specification and Abstract: 31 pages (excluding claims)
  - Claims: 5 pages
  - Drawings: 21 pages
- Formal Drawings Transmittal Letter
- Declaration/Power of Attorney (Signed)
- IDS: Transmittal and Form 1449
- Copies of: 1 U.S. Patent Document, 0 Foreign Patent Documents, and 0 Other Documents
- Other: Postcard

Attorney Docket No.: 020.0347.US.CON

Attorney: Patrick J.S. Inouye

Date Mailed: August 22, 2003

Reg. No. 40,297



PATRICK J.S. INOUYE, P.S.  
Attorney At Law  
Business Account  
810 THIRD AVENUE SUITE 258  
SEATTLE, WA 98104

WELLS FARGO BANK  
1215 - 4TH AVENUE  
SEATTLE, WA 98101  
19-854/1250

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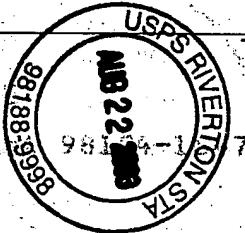
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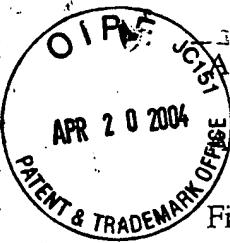
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE



Applicant(s): Bardy

APR 20 2004

Application No.: Unassigned

Filed: August 22, 2003

Title: System And Method For Providing  
Feedback To An Individual Patient  
For Automated Remote Patient Care

Group Art Unit: Unassigned

Examiner: Unassigned

Attorney Docket No.: 020.0347.US.CON

Assistant Commissioner for Patents  
Alexandria, VA 22313-1450

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Sir:

Enclosed herewith please find:

( )        sheets of redlined drawing(s) which indicate proposed changes to the drawing(s). Upon approval of these proposed changes, formal drawing(s) will be submitted.

( )        sheets of corrected formal drawing(s), as required by the Notice of Patent Drawings Objection (PTO-948) which accompanied the Office Action dated \_\_\_\_\_.

( )        sheets of corrected formal drawing(s), as required by the Notice of Patent Drawing(s) Objection (PTO-948) and approved in the Notice of Allowability dated \_\_\_\_\_.

(X) 21 sheets of formal drawings, submitted with the enclosed continuation Utility Patent Application.

Examiner's approval of the entry of these drawings is respectfully requested.

Respectfully Submitted,

By \_\_\_\_\_

Patrick J.S. Inouye, Esq.



22895

PATENT TRADEMARK OFFICE

Attorney/Agent for Applicant(s)  
Reg. No. 40297

Date: August 22, 2003

Telephone No.: (206) 381-3900



Date: 02/18/2004

Fax Transmission To: MIKE VRBANAC  
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 ATTORNEY AT LAW  
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 SEATTLE WA 98104

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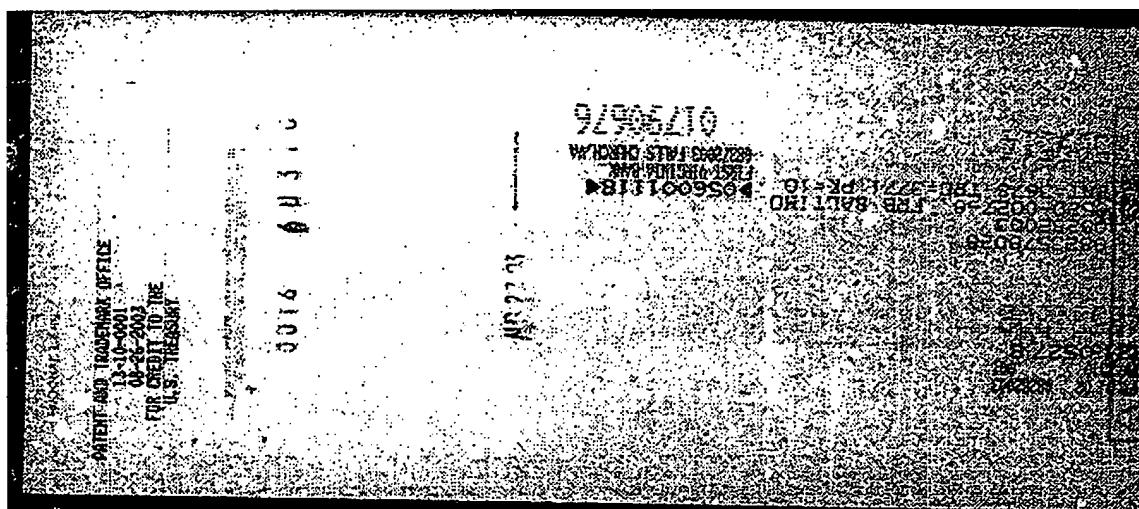
Seven hundred Fifty and 00/100 DOLLARS

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Washington, DC 20231

FOR *020.0347.US.CON*

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